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106TH CONGRESS
1ST SESSION

H. R. 854

To amend title XIX of the Social Security Act to provide for the presumptive eligibility of Medicare beneficiaries for the qualified Medicare beneficiary and special low-income Medicare beneficiary programs, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 25, 1999

Mr. BENTSEN introduced the following bill; which was referred to the Committee on Commerce

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A BILL

To amend title XIX of the Social Security Act to provide for the presumptive eligibility of Medicare beneficiaries for the qualified Medicare beneficiary and special low-income Medicare beneficiary programs, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Low-Income Medicare Beneficiary Assistance Act of 1999".

SEC. 2. PRESUMPTIVE ELIGIBILITY OF CERTAIN LOW-INCOME INDIVIDUALS FOR MEDICARE COST-SHARING UNDER THE QMB OR SLMB PROGRAM.

Title XIX of the Social Security Act is amended by inserting after section 1920A the following new section:

"PRESUMPTIVE ELIGIBILITY OF CERTAIN LOW-INCOME INDIVIDUALS

"SEC. 1920B. (a) A State plan approved under section 1902 shall provide for making medical assistance with respect to medicare cost-sharing covered under the State plan available to a low-income individual on the date the low-income individual becomes entitled to benefits under part A of title XVIII during a presumptive eligibility period.

"(b) For purposes of this section:

"(1) The term 'low-income individual' means an individual who at the age of 65 years is described—

"(A) in section 1902(a)(10)(E)(i), or

"(B) in section 1902(a)(10)(E)(iii).

"(2) The term 'medicare cost-sharing'—

"(A) with respect to an individual described in paragraph (1)(A), has the meaning given such term in section 1905(p)(3).

"(B) with respect to an individual described in paragraph (1)(B), has the meaning given such term in section 1905(p)(3)(A).

"(3) The term 'presumptive eligibility period' means, with respect to a low-income individual, the period that—

"(A) begins with the date on which a qualified entity determines, on the basis of preliminary information, that the income and resources of the individual do not exceed the applicable income and resource level of eligibility under the State plan, and

"(B) ends with (and includes) the earlier of—

"(i) the day on which a determination is made with respect to the eligibility of the low-income individual for medical assistance for medical cost-sharing under the State plan, or

"(ii) in the case of a low-income individual on whose behalf an application is not filed by the last day of the month following the month during which the entity makes the determination referred to in subparagraph (A), such last day.

"(4)(A) Subject to subparagraph (B), the term 'qualified entity' means any of the following:

"(i) Qualified individuals within the Social Security Administration.

"(ii) An entity determined by the State agency to be capable of making determinations of the type described in paragraph (3).

"(B) The Secretary may issue regulations further limiting those entities that may become qualified entities in order to prevent fraud and abuse and for other reasons.

"(c)(1) The State agency, after consultation with the Secretary, shall provide qualified entities with—

"(A) such forms as are necessary for an application to be made on behalf of a low-income individual for medical assistance for medical cost-sharing under the State plan, and

"(B) information on how to assist low-income individuals and other persons in completing and filing such forms.

"(2) A qualified entity that determines under subsection (b)(2)(A) that a low-income individual is presumptively eligible for medical assistance for medical cost-sharing under a State plan shall—

"(A) notify the State agency of the determination within 5 working days after the date on which the determination is made, and

"(B) inform the low-income individual at the time the determination is made that an application for medical assistance for medical cost-sharing under the State plan is required to be made by not later than the last day of the month following the month during which the determination is made.

"(3) In the case of a low-income individual who is determined by a qualified entity to be presumptively eligible for medical assistance for medical cost-sharing under a State plan, the low-income individual shall make application for medical assistance for medical cost-sharing under such plan by not later than the last day of the month following the month during which the determination is made.

"(d) Notwithstanding any other provision of this title, medical assistance for medicare cost-sharing that—

"(1) is furnished to a low-income individual during a presumptive eligibility period under the State plan; and

"(2) is included in the services covered by a State plan;

shall be treated as medical assistance provided by such plan for purposes of section 1903.".

SEC. 3. AUTHORIZATION OF APPROPRIATIONS FOR OUTREACH EFFORTS.

There is authorized to be appropriated to the Secretary of Health and Human Services $12,000,000 for the purpose of conducting outreach efforts to increase awareness of the availability of medical assistance for medicare cost-sharing under a State plan under title XIX of the Social Security Act to eligible low-income medicare beneficiaries described in clauses (i) and (iii), respectively, of section 1902(a)(10)(E) of such Act (42 U.S.C. 1396a(a)(10)(E)).

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